

Form Prescribed By  
Indiana State Board of  
Health under Authority  
Chap. 126, Ind. Acts 1905



STATE OF INDIANA  
APPLICATION FOR MARRIAGE LICENSE

FLOYD County

Book 65 Page 497

File August 16, 1968  
Date of Application

MALE

Medical Examination Report Dated August 15, 1968

Name of Physician Daniel Cannon

FEMALE

Medical Examination Report Dated August 15, 1968

Name of Physician Daniel Cannon

ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".

MALE APPLICANT

Name First: Michael Middle: D. Last: Cook  
Date of Birth Month: August Day: 23 Year: 1949  
Place of Birth (State or foreign country) New Albany, Indiana  
Residence Address Street or R.: 418 W. 8th Street City: New Albany, Indiana  
Previous Marital Status: Never Married ☒ Number of Previous Marriages: 0

Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐

Color or Race White ☒ Negro ☐ Other ☐ (specify) \_\_\_\_\_

Usual Occupation General Plywood

Date of birth verified by: ☐ Birth Cert. ☐ Judicial Decree

Other (Specify) Drivers License

1. Are you now or have you been adjudged, diagnosed or considered as:  
An Imbecile? No ☒ Yes ☐  
Of Unsound Mind? No ☒ Yes ☐
2. Are you under guardianship as a person of unsound mind? No ☒ Yes ☐
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? No ☒ Yes ☐  
If answer to 3 is "yes" has the cause of such condition been removed? No ☒ Yes ☐
4. Are you afflicted with a transmissible disease? No ☒ Yes ☐
5. Are you related to the bride closer than second cousin? No ☒ Yes ☐
6. Are you now under the influence of intoxicating liquor? No ☒ Yes ☐
7. Are you now under the influence of a narcotic drug? No ☒ Yes ☐
8. Are you able to support a family? Yes ☒ No ☐
9. Are you likely to so continue? Yes ☒ No ☐
10. Do you have minor children from one or more former marriages? No ☒ Yes ☐  
(If yes, answer questions a, b, c)  
(a) List their full names, ages and addresses

Name Age Address

- (b) Are you supporting or contributing to their support? Yes ☐ No ☒
- (c) Are you complying with any court order or orders issued for their support? Yes ☐ No ☒

11. Full name of father: David C. Cook

Residence of father (if deceased so state) Same

Occupation of father Foreman Race of father W

Birthplace of father (State or foreign country) Indiana

12. Full maiden name of mother: Doris M. Jackson

Residence of mother (if deceased so state) Same

Occupation of mother Housewife Race of mother W

Birthplace of mother (State or foreign country) Indiana

State of Indiana, Floyd } ss: I depose and state the information given in this application is true and correct.

County of: Signed: Michael P. Cook

New Address:

Subscribed and sworn to before me this 16th day of August, 1968

William C. Cochran FLOYD County Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.

State of Indiana, Floyd } ss:

County of: Signed: Mr. David Cook Father

Signed: Mrs. David Cook Mother

Subscribed and sworn to before me this 19th day of Aug, 1968

William C. Cochran Clerk

FEMALE APPLICANT

Name First: Jane Middle: Anita Last: Riddle  
Date of Birth Month: April Day: 12 Year: 1950  
Place of Birth (State or foreign country) Jeffersonville, Indiana  
Residence Address Street or R.: 720 Hopkins Lane City: Jeffersonville, Indiana  
Maiden Name if Different

Previous Marital Status: Never Married ☒ Number of Previous Marriages: 0

Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐

Color or Race White ☒ Negro ☐ Other ☐ (specify) \_\_\_\_\_

Usual Occupation Fine's

Date of birth verified by: ☐ Birth Cert. ☐ Judicial Decree

Other (Specify) Drivers Permit

1. Are you now or have you been adjudged, diagnosed or considered as:  
An Imbecile? No ☒ Yes ☐  
Of Unsound Mind? No ☒ Yes ☐
2. Are you under guardianship as a person of unsound mind? No ☒ Yes ☐
3. Are you afflicted with a transmissible disease? No ☒ Yes ☐
4. Are you related to the groom closer than second cousin? No ☒ Yes ☐
5. Are you now under the influence of intoxicating liquor? No ☒ Yes ☐
6. Are you now under the influence of a narcotic drug? No ☒ Yes ☐
7. Full name of father: Horace E. Riddle

Residence of father (if deceased so state) Same

Occupation of father Pepsi-Cola Race of father W

Birthplace of father (State or foreign country) Kentucky

8. Full maiden name of mother: Millie G. Feltner

Residence of mother (if deceased so state) Same

Occupation of mother Ohio Matheson of mother W

Birthplace of mother (State or foreign country) Kentucky

State of Indiana, Floyd } ss: I depose and state the information given in this application is true and correct.

County of: Signed: Jane Anita Riddle

New Address: 1905 Spring Lane Road

Subscribed and sworn to before me this 16th day of August, 1968

William C. Cochran FLOYD County Circuit Court

CONSENT OF PARENTS, PARENT OR GUARDIAN

We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.

State of Indiana, } ss:

County of: Signed: \_\_\_\_\_ Father

Signed: \_\_\_\_\_ Mother

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

\_\_\_\_\_ Clerk

COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the \_\_\_\_\_ County \_\_\_\_\_ Court by written order issued \_\_\_\_\_ and filed in \_\_\_\_\_ authorizes and directs the issuance of a marriage license to the above named parties.

RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE

Be It Remembered, there was filed in my office a marriage license issued by the clerk of the Floyd County Circuit Court of Indiana dated the 19th day of August, 1968, authorizing the joining together as husband and wife

Michael D. Cook and Jane Anita Riddle

Be it further remembered, the following marriage certificate was filed in my office, to-wit:

I, Rev. W. P. Gaines, hereby certify that on the 24th day of August,

one thousand nine hundred and sixty-eight at Jeffersonville, County of Clark,

State of Indiana, Groom: Michael D. Cook of Floyd County, State of Indiana,

and, Bride: Jane Anita Riddle of Clark County, State of Indiana,

were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Floyd County.

Dated this 24th day of August, 1968.

Signed: Rev. W. P. Gaines

Official Designation: Minister

27th day of August, 1968

Signed: William C. Cochran Clerk

FLOYD County Circuit Court

Filed and recorded in accordance with the laws of the State of Indiana this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

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